

General Assembly

Substitute Bill No. 2

January Session, 2021



AN ACT CONCERNING SOCIAL EQUITY AND THE HEALTH, SAFETY AND EDUCATION OF CHILDREN.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. (NEW) (Effective July 1, 2021) (a) As used in this section, (1) 2 "evidence-based" describes a training program that (A) incorporates 3 methods demonstrated to be effective for the intended population 4 through scientifically based research, including statistically controlled 5 evaluations or randomized trials, (B) can be implemented with a set of 6 procedures to allow successful replication in the state, (C) achieves 7 sustained, desirable outcomes, and (D) when possible, has been 8 determined to be cost-beneficial, and (2) "Question, Persuade and Refer 9 (QPR) Institute Gatekeeper Training" means an educational program 10 designed to teach lay and professional persons who work with youth 11 the warning signs of a suicide crisis and how to respond.

(b) The Youth Suicide Advisory Board, established pursuant to section 17a-52 of the general statutes, and the Office of the Child Advocate, shall jointly administer an evidence-based youth suicide prevention training program in each district department of health formed pursuant to section 19a-241 of the general statutes. The training program shall provide certification in QPR Institute Gatekeeper Training, utilizing a training model that will enable participants to

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- provide QPR Institute Gatekeeper Training to other individuals upon completion of the training program. Such training program shall be offered not later than July 1, 2022, and at least once every three years thereafter.
 - (c) The director of health for each district department of health shall determine the eligibility criteria for participation in the youth suicide prevention training program. Participants shall be members of the following groups within such district: (1) Employees of such district department of health, (2) employees of youth service bureaus established pursuant to section 10-19m of the general statutes, (3) school employees, as defined in section 10-222d of the general statutes, (4) employees and volunteers of youth-serving organizations, (5) employees and volunteers of operators of youth athletic activities, as defined in section 21a-432 of the general statutes, (6) employees of municipal social service agencies, (7) members of paid municipal or volunteer fire departments, and (8) members of local police departments. With respect to school employees, such training program may be included as part of an in-service training program provided pursuant to section 10-220a of the general statutes, as amended by this act.
 - (d) Any individual who has received certification in QPR Institute Gatekeeper Training through the training program administered pursuant to subsection (b) of this section may, during the period in which such certification is valid, provide QPR Institute Gatekeeper Training to any member of a group described in subdivisions (1) to (8), inclusive, of subsection (c) of this section and members of the public.
 - (e) The Youth Suicide Advisory Board and the Office of the Child Advocate may contract with a nongovernmental entity that provides evidence-based suicide prevention training to carry out the provisions of this section.
- Sec. 2. Subsection (a) of section 20-12b of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1*,

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- (a) The department may, upon receipt of a fee of one hundred ninety dollars, issue a physician assistant license to an applicant who: (1) Holds a baccalaureate or higher degree in any field from a regionally accredited institution of higher education; (2) has graduated from an accredited physician assistant program; (3) has passed the certification examination of the national commission; (4) has satisfied the mandatory continuing medical education requirements of the national commission for current certification by such commission, [and] (5) on and after January 1, 2022, has completed not less than two hours of training or education, approved by the Commissioner of Public Health, on (A) screening for conditions such as post-traumatic stress disorder, risk of suicide, depression and grief, and (B) suicide prevention training, during the first renewal period in which continuing education is required and not less than once every six years thereafter, (6) has passed any examination or continued competency assessment the passage of which may be required by the national commission for maintenance of current certification by such commission; and [(5)] (7) has completed not less than sixty hours of didactic instruction in pharmacology for physician assistant practice approved by the department.
- Sec. 3. Subsection (a) of section 20-73b of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1*, 2021):
 - (a) Except as otherwise provided in this section, each physical therapist licensed pursuant to this chapter shall complete a minimum of twenty hours of continuing education during each registration period. For purposes of this section, registration period means the twelvementh period for which a license has been renewed in accordance with section 19a-88 and is current and valid. The continuing education shall be in areas related to the individual's practice, except, on and after January 1, 2022, shall include not less than two hours of training or education on (1) screening for conditions such as post-traumatic stress disorder, risk of suicide, depression and grief, and (2) suicide prevention

- training, during the first registration period in which continuing 84 85 education is required and not less than once every six years thereafter. 86 Qualifying continuing education activities include, but are not limited to, courses offered or approved by the American Physical Therapy 87 88 Association or the Commissioner of Public Health or any component of 89 the American Physical Therapy Association, a hospital or other licensed 90 health care institution or a regionally accredited institution of higher 91 education.
- 92 Sec. 4. Section 20-74h of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2021*):

Licenses for occupational therapists and occupational therapy assistants issued under this chapter shall be subject to renewal once every two years and shall expire unless renewed in the manner prescribed by regulation upon the payment of two times the professional services fee payable to the State Treasurer for class B as defined in section 33-182*l*, plus five dollars. The department shall notify any person or entity that fails to comply with the provisions of this section that the person's or entity's license shall become void ninety days after the time for its renewal unless it is so renewed. Any such license shall become void upon the expiration of such ninety-day period. The commissioner shall establish additional requirements for licensure renewal which provide evidence of continued competency, which, on and after January 1, 2022, shall include not less than two hours of training or education, approved by the Commissioner of Public Health, on (1) screening for conditions such as post-traumatic stress disorder, risk of suicide, depression and grief, and (2) suicide prevention training during the first renewal period and not less than once every six years thereafter. The holder of an expired license may apply for and obtain a valid license only upon compliance with all relevant requirements for issuance of a new license. A suspended license is subject to expiration and may be renewed as provided in this section, but such renewal shall not entitle the licensee, while the license remains suspended and until it is reinstated, to engage in the licensed activity, or in any other conduct

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- or activity in violation of the order or judgment by which the license was
- suspended. If a license revoked on disciplinary grounds is reinstated,
- the licensee, as a condition of reinstatement, shall pay the renewal fee.
- Sec. 5. (NEW) (*Effective July 1, 2021*) (a) As used in this section:
- 121 (1) "Contact hour" means a minimum of fifty minutes of continuing 122 education and activities; and
- 123 (2) "Registration period" means the one-year period for which a 124 license has been renewed in accordance with section 19a-88 of the 125 general statutes and is current and valid.
- 126 (b) For registration periods beginning on and after January 1, 2022, a 127 registered nurse licensed pursuant to section 20-93 of the general 128 statutes and a licensed practical nurse licensed pursuant to section 20-129 96 of the general statutes applying for license renewal shall, during the 130 first renewal period and not less than once every six years thereafter, 131 earn not less than two contact hours of training or education on (1) 132 screening for conditions such as post-traumatic stress disorder, risk of 133 suicide, depression and grief, and (2) suicide prevention training. For 134 purposes of this section, qualifying continuing education activities 135 include, but are not limited to, in-person and online courses offered or 136 approved by the American Nurses Association, Connecticut Hospital 137 Association, Connecticut Nurses Association, Connecticut League for 138 Nursing, a specialty nursing society or an equivalent organization in 139 another jurisdiction, an educational offering sponsored by a hospital or 140 other health care institution or a course offered by a regionally 141 accredited academic institution or a state or local health department. 142 The Commissioner of Public Health may grant a waiver of not more 143 than ten contact hours of continuing education for a registered nurse or 144 licensed practical nurse who: (A) Engages in activities related to such 145 nurse's service as a member of the Connecticut State Board of Examiners 146 for Nursing, established pursuant to section 20-88 of the general 147 statutes; or (B) assists the Department of Health with its duties to boards 148 and commissions as described in section 19a-14 of the general statutes.

- (c) Each registered nurse and licensed practical nurse applying for license renewal pursuant to section 19a-88 of the general statutes shall sign a statement attesting that he or she has satisfied the continuing education requirements of subsection (b) of this section on a form prescribed by the Department of Public Health. Each licensee shall retain records of attendance or certificates of completion that demonstrate compliance with the continuing education requirements of subsection (b) of this section for a minimum of three years following the year in which the continuing education was completed and shall submit such records or certificates to the department for inspection not later than forty-five days after a request by the department for such records or certificates.
- Sec. 6. Subsection (a) of section 20-102ee of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1*, 2021):
 - (a) The Commissioner of Public Health shall adopt regulations, in accordance with the provisions of chapter 54, concerning the regulation of nurse's aides. Such regulations shall require a training program for nurse's aides of not less than one hundred hours. Not less than seventy-five of such hours shall include, but not be limited to, basic nursing skills, personal care skills, care of cognitively impaired residents, recognition of mental health and social service needs, basic restorative services and residents' rights. Not less than twenty-five of such hours shall include, but not be limited to, specialized training in understanding and responding to challenging behaviors related to physical, psychiatric, psychosocial and cognitive disorders. On and after January 1, 2022, not less than two of such hours shall include screening for conditions such as (1) post-traumatic stress disorder, risk of suicide, depression and grief, and (2) suicide prevention training from training or education providers approved by the commissioner.
- Sec. 7. Subsection (b) of section 20-185k of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1*, 2021):

- 182 (b) A license issued under this section may be renewed annually. The 183 license shall be renewed in accordance with the provisions of section 184 19a-88, for a fee of one hundred seventy-five dollars. Each behavior analyst applying for license renewal shall furnish evidence satisfactory 185 186 to the commissioner of (1) having current certification with the Behavior 187 Analyst Certification Board, and (2) on and after January 1, 2022, 188 completing not less than two hours of training or education, approved by the Commissioner of Public Health, on (A) screening for conditions 189 190 such as post-traumatic stress disorder, risk of suicide, depression and 191 grief, and (B) suicide prevention training during the first renewal period 192 and not less than once every six years thereafter.
- Sec. 8. Subsection (f) of section 20-195ttt of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1*, 2021):
- 196 (f) A certification issued under this section may be renewed every 197 three years. The license shall be renewed in accordance with the 198 provisions of section 19a-88 for a fee of one hundred dollars. Each 199 certified community health worker applying for license renewal shall furnish evidence satisfactory to the commissioner of having completed 200 201 a minimum of thirty hours of continuing education requirements, 202 including two hours focused on cultural competency, systemic racism 203 or systemic oppression, [and] two hours focused on social determinants 204 of health and on and after January 1, 2022, two hours of training on (1) 205 screening for conditions such as post-traumatic stress disorder, risk of suicide, depression and grief, and (2) suicide prevention training, 206 207 provided by training or education providers approved by the 208 Commissioner of Public Health.
- Sec. 9. Subsections (d) and (e) of section 20-206mm of the general statutes are repealed and the following is substituted in lieu thereof (*Effective July 1, 2021*):
- 212 (d) On or after January 1, 2020, each person seeking certification as an 213 emergency medical responder, emergency medical technician or

advanced emergency medical technician shall apply to the department on forms prescribed by the commissioner. Applicants for certification shall comply with the following requirements: (1) For initial certification, an applicant shall present evidence satisfactory to the commissioner that the applicant (A) has completed an initial training program consistent with the National Emergency Medical Services Education Standards, as promulgated by the National Highway Traffic Safety Administration for the emergency medical responder, emergency medical technician or advanced emergency medical technician curriculum, (B) has passed the examination administered by the national organization for emergency medical certification for an emergency medical responder, emergency medical technician or advanced emergency medical technician as necessary for the type of certification sought by the applicant or an examination approved by the department, and (C) has no pending disciplinary action or unresolved complaints against such applicant, (2) a certificate issued under this subsection shall be renewed once every two years in accordance with the provisions of section 19a-88 upon presentation of evidence satisfactory to the commissioner that the applicant (A) has successfully completed continuing education for an emergency medical responder, emergency medical technician or advanced emergency medical technician as required by the national organization for emergency medical certification or as approved by the department, (B) on and after January 1, 2022, has completed not less than two hours of training or education, approved by the Commissioner of Public Health, on (i) screening for conditions such as post-traumatic stress disorder, risk of suicide, depression and grief, and (ii) suicide prevention training during the first renewal period and not less than once every six years thereafter, or [(B)] (C) presents a current certification as an emergency medical responder, emergency medical technician or advanced emergency medical technician from the national organization for emergency medical certification, or (3) for certification by endorsement from another state, an applicant shall present evidence satisfactory to the commissioner that the applicant (A) is currently certified as an emergency medical responder, emergency medical technician or

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advanced emergency medical technician in good standing by a state that maintains certification or licensing requirements that the commissioner determines are equal to or greater than those in this state, or (B) holds a current certification as an emergency medical responder, emergency medical technician or advanced emergency medical technician from the national organization for emergency medical certification.

(e) On or after January 1, 2020, each person seeking certification as an emergency medical services instructor shall apply to the department on forms prescribed by the commissioner. Applicants for certification shall comply with the following requirements: (1) For initial certification, an applicant shall present evidence satisfactory to the commissioner that the applicant (A) is currently certified by the department as an emergency medical technician or advanced emergency medical technician or licensed by the department as a paramedic, (B) has completed a program of training as an emergency medical instructor based on current national education standards within the prior two years, (C) has completed twenty-five hours of teaching activity under the supervision of a currently certified emergency medical services instructor, (D) has completed written and practical examinations as prescribed by the commissioner, (E) has no pending disciplinary action or unresolved complaints against the applicant, and (F) effective on a date prescribed by the commissioner, presents documentation satisfactory to the commissioner that the applicant is currently certified as an emergency medical technician, advanced emergency medical technician or paramedic by the national organization for emergency medical certification, or (2) for renewal certification, an applicant shall present evidence satisfactory to the commissioner that the applicant (A) has successfully completed continuing education and teaching activity as required by the department, which, on and after January 1, 2022, shall include not less than two hours of training or education, approved by the Commissioner of Public Health, on (i) screening for conditions such as post-traumatic stress disorder, risk of suicide, depression and grief, and (ii) suicide prevention training, during the first renewal period and not less than once every six years thereafter, (B) maintains current

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certification by the department as an emergency medical technician, advanced emergency medical technician or licensure by the department as a paramedic, and (C) effective on a date as prescribed by the commissioner, presents documentation satisfactory the commissioner that the applicant is currently certified as an emergency medical technician, advanced emergency medical technician or paramedic by the national organization for emergency medical certification.

- Sec. 10. Section 19a-14c of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2021*):
 - (a) For the purposes of this section, "outpatient mental health treatment" means the treatment of mental disorders, emotional problems or maladjustments with the object of (1) removing, modifying or retarding existing symptoms; (2) improving disturbed patterns of behavior; and (3) promoting positive personality growth and development. Treatment shall not include prescribing or otherwise dispensing any medication which is a legend drug as defined in section 20-571.
 - (b) A psychiatrist licensed pursuant to chapter 370, a psychologist licensed pursuant to chapter 383, an independent social worker certified pursuant to chapter 383b or a marital and family therapist licensed pursuant to chapter 383a may provide outpatient mental health treatment to a minor without the consent or notification of a parent or guardian at the request of the minor if (1) requiring the consent or notification of a parent or guardian would cause the minor to reject such treatment; (2) the provision of such treatment is clinically indicated; (3) the failure to provide such treatment would be seriously detrimental to the minor's well-being; (4) the minor has knowingly and voluntarily sought such treatment; and (5) in the opinion of the provider of treatment, the minor is mature enough to participate in treatment productively. The provider of such treatment shall document the reasons for any determination made to treat a minor without the consent or notification of a parent or guardian and shall include such

documentation in the minor's clinical record, along with a written statement signed by the minor stating that (A) [he] the minor is voluntarily seeking such treatment; (B) [he] the minor has discussed with the provider the possibility of involving his or her parent or guardian in the decision to pursue such treatment; (C) [he] the minor has determined it is not in his or her best interest to involve his or her parent or guardian in such decision; and (D) [he] the minor has been given adequate opportunity to ask the provider questions about the course of his or her treatment.

(c) [After the sixth session of outpatient mental health treatment provided to a minor pursuant to this section, the provider of such treatment shall notify the minor that the consent, notification or involvement of a parent or guardian is required to continue treatment, unless such a requirement would be seriously detrimental to the minor's well-being. If the provider determines such a requirement would be seriously detrimental to the minor's well-being, he shall document such determination in the minor's clinical record, review such determination every sixth session thereafter and document each such review. If the provider determines such a requirement would no longer be seriously detrimental to the minor's well-being, he shall require the consent, notification or involvement of a parent or guardian as a condition of continuing treatment.] (1) Except as otherwise provided in subdivision (2) of this subsection, a minor may request and receive as many outpatient mental health treatment sessions as necessary without the consent or notification of a parent or guardian. No provider shall notify a parent or guardian of treatment provided pursuant to this section or disclose any information concerning such treatment to a parent or guardian without the consent of the minor.

(2) A provider may notify a parent or guardian of treatment provided pursuant to this section or disclose certain information concerning such treatment without the consent of the minor who receives such treatment provided (A) such provider determines such notification or disclosure is necessary for the minor's well-being, (B) the treatment provided to the

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- 349 minor is solely for mental health and not for a substance use disorder, 350 and (C) the minor is provided an opportunity to express any objection to such notification or disclosure. The provider shall document his or 351 352 her determination concerning such notification or disclosure and any 353 objections expressed by the minor in the minor's clinical record. A 354 provider may disclose to a minor's parent or guardian the following 355 information concerning such minor's outpatient mental health 356 treatment: (i) Diagnosis; (ii) treatment plan and progress in treatment; 357 (iii) recommended medications, including risks, benefits, side effects, typical efficacy, dose and schedule; (iv) psychoeducation about the 358 359 minor's mental health; (v) referrals to community resources; (vi) 360 coaching on parenting or behavioral management strategies; and (vii) crisis prevention planning and safety planning. A provider shall release 361 362 a minor's entire clinical record to another provider upon the request of 363 the minor or such minor's parent or guardian.
 - (d) A parent or guardian who is not informed of the provision of outpatient mental health treatment for his <u>or her</u> minor child pursuant to this section shall not be liable for the costs of the treatment provided.
- Sec. 11. Subsection (a) of section 10-148a of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1*, 2021):
 - (a) For the school year commencing July 1, [2019] 2021, and each school year thereafter, each certified employee shall participate in a program of professional development. Each local and regional board of education shall make available, annually, at no cost to its certified employees, a program of professional development that is not fewer than eighteen hours in length, of which a preponderance is in a small group or individual instructional setting. Such program of professional development shall (1) be a comprehensive, sustained and intensive approach to improving teacher and administrator effectiveness in increasing student knowledge achievement, (2) focus on refining and improving various effective teaching methods that are shared between and among educators, (3) foster collective responsibility for improved

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student performance, (4) be comprised of professional learning that (A) is aligned with rigorous state student academic achievement standards, (B) is conducted among educators at the school and facilitated by principals, coaches, mentors, distinguished educators, as described in section 10-145s, or other appropriate teachers, (C) occurs frequently on an individual basis or among groups of teachers in a job-embedded process of continuous improvement, and (D) includes a repository of best practices for teaching methods developed by educators within each school that is continuously available to such educators for comment and updating, and (5) include training in culturally responsive pedagogy and practice. Each program of professional development shall include professional development activities in accordance with the provisions of subsection (b) of this section. The principles and practices of socialemotional learning shall be integrated throughout the components of such program of professional development described in subdivisions (1) to (5), inclusive, of this subsection.

Sec. 12. Subsection (b) of section 10-220a of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1,* 2021):

(b) Not later than a date prescribed by the commissioner, each local and regional board of education shall establish a professional development and evaluation committee. Such professional development and evaluation committee shall consist of (1) at least one teacher, as defined in subsection (a) of section 10-144d, selected by the exclusive bargaining representative for certified employees chosen pursuant to section 10-153b, (2) at least one administrator, as defined in subsection (a) of section 10-144e, selected by the exclusive bargaining representative for certified employees chosen pursuant to section 10-153b, and (3) such other school personnel as the board deems appropriate. The duties of such committees shall include, but not be limited to, participation in the development or adoption of a teacher evaluation and support program for the district, pursuant to section 10-151b, and the development, evaluation and annual updating of a

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comprehensive local professional development plan for certified employees of the district. Such plan shall: (A) Be directly related to the educational goals prepared by the local or regional board of education pursuant to subsection (b) of section 10-220, as amended by this act, (B) on and after July 1, [2011] 2021, be developed with full consideration of the priorities and needs related to student social-emotional learning, in accordance with the provisions of section 10-148a, as amended by this act, and student academic outcomes as determined by the State Board of Education, [and] (C) provide for the ongoing and systematic assessment and improvement of both teacher evaluation and professional development of the professional staff members of each such board, including personnel management and evaluation training or experience for administrators, [shall] and (D) be related to regular and special student needs and may include provisions concerning career incentives and parent involvement. The State Board of Education shall develop guidelines to assist local and regional boards of education in determining the objectives of the plans and in coordinating staff development activities with student needs and school programs.

Sec. 13. Subsection (b) of section 10-220 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1*, 2021):

(b) The board of education of each local or regional school district shall, with the participation of parents, students, school administrators, teachers, citizens, local elected officials and any other individuals or groups such board shall deem appropriate, prepare a statement of educational goals for such local or regional school district. The statement of goals shall be consistent with state-wide goals pursuant to subsection (c) of section 10-4 and include goals for the integration of principles and practices of social-emotional learning in the program of professional development for the school district, in accordance with the provisions of section 10-148a, as amended by this act, and career placement for students who do not pursue an advanced degree immediately after graduation. Each local or regional board of education

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- shall annually establish student objectives for the school year which relate directly to the statement of educational goals prepared pursuant
- 450 to this subsection and which identify specific expectations for students
- in terms of skills, knowledge and competence.
- Sec. 14. Section 10-221 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2021*):
- 454 (a) As used in this section, "virtual learning" means instruction by
 455 means of one or more Internet-based software platforms as part of a
 456 remote learning model.
- 457 [(a)] (b) Boards of education shall prescribe rules for the management, 458 studies, classification and discipline of the public schools and, subject to 459 the control of the State Board of Education, the textbooks to be used; 460 shall make rules for the control, within their respective jurisdictions, of 461 school library media centers, including Internet access and content, and 462 approve the selection of books and other educational media therefor, 463 and shall approve plans for public school buildings and superintend 464 any high or graded school in the manner specified in this title.
 - [(b) Not later than July 1, 1985, each] (c) Each local and regional board of education shall develop, adopt and implement written policies concerning homework, attendance, promotion and retention. The Department of Education shall make available model policies and guidelines to assist local and regional boards of education in meeting the responsibilities enumerated in this subsection.
 - [(c)] (d) Boards of education may prescribe rules to impose sanctions against pupils who damage or fail to return textbooks, library materials or other educational materials. Said boards may charge pupils for such damaged or lost textbooks, library materials or other educational materials and may withhold grades, transcripts or report cards until the pupil pays for or returns the textbook, library book or other educational material.
- [(d) Not later than July 1, 1991, each] (e) Each local and regional board

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of education shall develop, adopt and implement policies and procedures in conformity with section 10-154a for (1) dealing with the use, sale or possession of alcohol or controlled drugs, as defined in subdivision (8) of section 21a-240, by public school students on school property, including a process for coordination with, and referral of such students to, appropriate agencies, and (2) cooperating with law enforcement officials.

- [(e) Not later than July 1, 1990, each] (f) Each local and regional board of education shall adopt a written policy and procedures for dealing with youth suicide prevention and youth suicide attempts. Each such board of education may establish a student assistance program to identify risk factors for youth suicide, procedures to intervene with such youths, referral services and training for teachers and other school professionals and students who provide assistance in the program.
- [(f) Not later than September 1, 1998, each] (g) (1) Each local and regional board of education shall develop, adopt and implement written policies and procedures to encourage parent-teacher communication. These policies and procedures may include monthly newsletters, required regular contact with all parents, flexible parent-teacher conferences, drop-in hours for parents, home visits and the use of technology such as homework hot lines to allow parents to check on their children's assignments and students to [get] receive assistance if needed. [For the school year commencing July 1, 2010, and each school year thereafter, such] Such policies and procedures shall require the district to conduct two flexible parent-teacher conferences for each school year.
- (2) For the school year commencing July 1, 2021, and each school year thereafter, the policies and procedures described in subdivision (1) of this subsection shall require the district to (A) offer parents the option of attending any parent-teacher conference by telephonic, video or other conferencing platform, (B) conduct one parent-teacher conference, in addition to those required pursuant to subdivision (1) of this subsection, during periods when such district provides virtual learning for more

than three consecutive weeks, and one additional parent-teacher conference every six months thereafter for the duration of such period of virtual learning, and (C) request from each student's parent the name and contact information of an emergency contact person who may be contacted if the student's parent cannot be reached to schedule a parent-teacher conference required pursuant to subparagraph (B) of this subdivision.

(3) On and after January 1, 2022, such policies and procedures shall require (A) a teacher conducting a parent-teacher conference required pursuant to subparagraph (B) of subdivision (2) of this subsection to provide a copy of the document developed pursuant to section 15 of this act to the parent prior to the parent-teacher conference, and (B) if a teacher is unable to make contact with a student's parent in order to schedule a parent-teacher conference required pursuant to subparagraph (B) of subdivision (2) of this subsection after making three attempts, such teacher shall report such inability to the school principal, school counselor or other school administrator designated by the local or regional board of education. Such principal, counselor or administrator shall contact any emergency contact person designated by the student's parent pursuant to subparagraph (C) of subdivision (2) of this subsection to ascertain such student's and family's health and safety.

Sec. 15. (NEW) (*Effective from passage*) Not later than December 1, 2021, the Department of Education shall develop, and annually update, a document for use by local and regional boards of education that provides information concerning educational, safety, mental health and food insecurity resources and programs available for students and their families. Such document shall contain, but need not be limited to, (1) providers of such resources and programs, including, but not limited to, the Departments of Education, Children and Families and Mental Health and Addiction Services, the United Way of Connecticut and local food banks, (2) descriptions of the relevant resources and programs offered by each provider, including, but not limited to, (A) the "Talk it

- Out" program administered by the Department of Children and 546 Families, and (B) any program that provides laptop computers, public 547 Internet access or home Internet service to students, (3) contact 548 information for each provider, resource and program, and (4) relevant
- 549 Internet web sites. The Department of Education shall annually
- 550 distribute such document electronically to each local and regional board
- 551 of education.

- Sec. 16. (NEW) (Effective from passage) (a) As used in this section, 552
- 553 "virtual learning" means instruction by means of one or more Internet-
- 554 based software platforms as part of a remote learning model.
- 555 (b) Not later than January 1, 2022, the Commissioner of Education
- 556 shall develop, and update as necessary, standards for virtual learning.
- 557 The standards shall not be deemed to be regulations, as defined in
- 558 section 4-166 of the general statutes.
- 559 (c) For the school year commencing July 1, 2022, and each school year
- thereafter, a local or regional board of education may authorize virtual 560
- 561 learning for students in grades nine to twelve, inclusive, provided such
- 562 board (1) provides such instruction in compliance with the standards
- 563 developed pursuant to subsection (b) of this section, and (2) adopts a
- 564 policy regarding the requirements for student attendance during virtual
- 565 learning, which shall (A) be in compliance with the Department of
- 566 Education's guidance on student attendance during virtual learning,
- 567 and (B) count the attendance of any student who spends not less than
- 568 one-half of the school day during such instruction engaged in (i) virtual
- 569 classes, (ii) virtual meetings, (iii) activities on time-logged electronic
- 570 systems, and (iv) the completion and submission of assignments.
- 571 Sec. 17. Section 10-16 of the general statutes is repealed and the
- 572 following is substituted in lieu thereof (*Effective July 1, 2021*):
- 573 Each school district shall provide in each school year no less than one
- hundred and eighty days of actual school sessions for grades 574
- 575 kindergarten to twelve, inclusive, nine hundred hours of actual school

work for full-day kindergarten and grades one to twelve, inclusive, and 576 577 four hundred and fifty hours of half-day kindergarten, provided school 578 districts shall not count more than seven hours of actual school work in 579 any school day towards the total required for the school year. Virtual 580 learning shall be considered an actual school session for purposes of this 581 section, provided, that, on and after January 1, 2022, such virtual 582 learning is conducted in compliance with the standards developed pursuant to subsection (b) of section 16 of this act. If weather conditions 583 584 result in an early dismissal or a delayed opening of school, a school district which maintains separate morning and afternoon half-day 585 586 kindergarten sessions may provide either a morning or afternoon halfday kindergarten session on such day. As used in this section, "virtual 587 588 learning" means instruction by means of one or more Internet-based 589 software platforms as part of a remote learning model.

Sec. 18. Section 10-198b of the general statutes is repealed and the following is substituted in lieu thereof (*Effective from passage*):

[On or before July 1, 2012, the] The State Board of Education shall define "excused absence", [and] "unexcused absence" [, and on or before January 1, 2016, the State Board of Education shall define] and "disciplinary absence" for use by local and regional boards of education for the purposes of carrying out the provisions of section 10-198a, reporting truancy, pursuant to subsection (c) of section 10-220, and calculating the district chronic absenteeism rate and the school chronic absenteeism rate pursuant to section 10-198c. On or before July 1, 2021, the State Board of Education shall amend the definitions of "excused absence" and "unexcused absence" to exclude a student's (1) (A) engagement in virtual classes, (B) virtual meetings, (C) activities on time-logged electronic systems, and (D) completion and submission of assignments, if such engagement accounts for not less than one-half of the school day during virtual learning authorized pursuant to section 16 of this act, and (2) absence resulting from such student taking a mental health wellness day permitted pursuant to section 19 of this act. As used in this section, "virtual learning" means instruction by means of one or

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- 609 <u>more Internet-based software platforms as part of a remote learning</u> 610 model.
- Sec. 19. (NEW) (*Effective July 1, 2021*) (a) As used in this section and section 10-198b of the general statutes, as amended by this act, "mental health wellness day" describes a school day during which a student attends to such student's emotional and psychological well-being in lieu of attending school.
- 616 (b) For the school year commencing July 1, 2021, and each school year 617 thereafter, a local or regional board of education shall permit any 618 student enrolled in grades kindergarten to twelve, inclusive, to take up 619 to four mental health wellness days during the school year, during 620 which day such student shall not be required to attend school. A student 621 shall not be required to present documentation or parental or guardian 622 consent to take a mental health wellness day, but, for purposes of the 623 school year limitation on such days pursuant to this subsection, shall 624 identify his or her absence as a mental health wellness day.
 - Sec. 20. Section 10-215 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2021*):
 - (a) Any local or regional board of education may establish and operate a school lunch program for public school children, may operate lunch services for its employees, may establish and operate a school breakfast program, as provided under federal laws governing said programs, or may establish and operate such other child feeding programs as it deems necessary. Charges for such lunches, breakfasts or other such feeding may be fixed by such boards and shall not exceed the cost of food, wages and other expenses directly incurred in providing such services. When such services are offered, a board shall provide free lunches, breakfasts or other such feeding to children whose economic needs require such action under the standards promulgated by said federal laws. Such board is authorized to purchase equipment and supplies that are necessary, to employ the necessary personnel, to utilize the services of volunteers and to receive and expend any funds and

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receive and use any equipment and supplies which may become available to carry out the provisions of this section. Any town board of education may vote to designate any volunteer organization within the town to provide a school lunch program, school breakfast program or other child feeding program in accordance with the provisions of this section.

- (b) For the school year commencing July 1, 2021, and each school year thereafter, a local or regional board of education shall include in any policy or procedure for the collection of unpaid charges for school lunches, breakfasts or other such feeding (1) a prohibition on publicly identifying or shaming a child for any such unpaid charges, including, but not limited to, delaying or refusing to serve a meal to such child, designating a specific meal option for such child or otherwise taking any disciplinary action against such child, (2) a declaration of the right for any child to purchase a meal, which meal may exclude any a la carte items or be limited to one meal for any school lunch, breakfast or other such feeding, and (3) a procedure for communicating with the parent or legal guardian of a child for the purpose of collecting such unpaid charges. Such communication shall include, but not be limited to, (A) information regarding local food pantries, (B) applications for the school district's program for free or reduced priced meals and for the supplemental nutrition assistance program administered by the Department of Social Services, and (C) a link to the Internet web site maintained by the town for such school district listing any community services available to the residents of such town.
- (c) A local or regional board of education may accept gifts, donations
 or grants from any public or private sources for the purpose of paying
 off any unpaid charges for school lunches, breakfasts or other such
 feeding.
- Sec. 21. Section 17a-10a of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2021*):
- 672 (a) The Commissioner of Children and Families shall ensure that a

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child placed in the care and custody of the commissioner pursuant to an order of temporary custody or an order of commitment is provided visitation with such child's parents and siblings, unless otherwise ordered by the court. In the event of a pandemic or outbreak of a communicable disease resulting in a declaration of a public health emergency by the Governor pursuant to section 19a-131a, or a declaration of a national emergency by the President of the United States, such child shall be provided opportunities to communicate with such child's parents and siblings by telephonic, video or other conferencing platform in lieu of in-person visitation, for the duration of any such declaration.

- (b) The commissioner shall ensure that such child's visits with his or her parents, or opportunities to communicate with such child's parents and siblings by telephonic, video or other conferencing platform in accordance with the provisions of subsection (a) of this section, shall occur as frequently as reasonably possible, based upon consideration of the best interests of the child, including the age and developmental level of the child, and shall be sufficient in number and duration to ensure continuation of the relationship.
- (c) If such child has an existing relationship with a sibling and is separated from such sibling as a result of intervention by the commissioner including, but not limited to, placement in a foster home or in the home of a relative, the commissioner shall, based upon consideration of the best interests of the child, ensure that such child has access to and visitation rights with such sibling throughout the duration of such placement. In determining the number, frequency and duration of sibling visits, the commissioner shall consider the best interests of each sibling, given each child's age and developmental level and the continuation of the sibling relationship. If the child and his or her sibling both reside within the state and within fifty miles of each other, the commissioner shall, within available appropriations, ensure that such child's visits with his or her sibling occur, on average, not less than once per week, unless the commissioner finds that the frequency of such

visitation is not in the best interests of each sibling.

(d) Not later than January 1, 2022, the commissioner shall develop a policy that requires the temporary cessation of in-person visitation provided pursuant to this section, on a case-by-case basis, in the event that a child or such child's parent or sibling is seriously ill due to a communicable disease, and visitation could result in the contraction of such disease by one or more participants in the visitation. Such policy shall require that such child be provided an opportunity to communicate with such child's parents and siblings by telephonic, video or other conferencing platform in lieu of such visitation. The commissioner shall define "seriously ill" and "communicable disease" for the purposes of carrying out this subsection.

[(d)] (e) The commissioner shall include in each child's case record information relating to the factors considered in making visitation determinations pursuant to this section. If the commissioner determines that such visits are not in the best interests of the child, that the occurrence of, on average, not less than one visit per week with his or her sibling is not in the best interests of each sibling, or that the number, frequency or duration of the visits requested by the child's attorney or guardian ad litem is not in the best interests of the child, the commissioner shall include the reasons for such determination in the child's case record.

[(e)] (f) On or before October first of each year, the commissioner shall report, in accordance with the provisions of section 11-4a, to the joint standing committee of the General Assembly having cognizance of matters relating to children, data sufficient to demonstrate compliance with subsections (a), (c) and [(d)] (e) of this section. Such data shall include the total annual number of children in out-of-home placements who have siblings, the total number of child cases with documented sibling visitation and the number of individual siblings involved in each case.

Sec. 22. Section 17a-103a of the general statutes is repealed and the

following is substituted in lieu thereof (*Effective July 1, 2021*):

- (a) The Commissioner of Children and Families shall establish and operate the telephone Careline for child abuse and neglect that shall be dedicated to receive reports of child abuse or neglect and to provide information concerning child abuse or neglect. The Careline shall accept all reports of child abuse or neglect regardless of the relationship of the alleged perpetrator to the child who is the alleged victim and regardless of the alleged perpetrator's affiliation with any organization or other entity in any capacity. The commissioner shall classify and evaluate all reports pursuant to the provisions of section 17a-101g.
- (b) Not later than July 1, 2022, the Commissioner of Children and Families shall expand the operation of the telephone Careline to accommodate the receipt and provision of information concerning child abuse or neglect by text message or mobile telephone application. Such expanded operation shall be monitored twenty-four hours per day and seven days per week by the Department of Children and Families.
- Sec. 23. (NEW) (Effective July 1, 2021) If the Commissioner of Children and Families, or the commissioner's designee, has authorized the immediate removal of a child from such child's home pursuant to subsection (e) of section 17a-101g of the general statutes, or is considering removing a child from such child's home, the commissioner shall provide written notice to the parent or guardian of such child. Such notice shall be in the parent or guardian's primary language, and contain (1) the date, time and location of any removal meeting the commissioner has scheduled, (2) a plain language explanation of the removal process, steps the commissioner intends to take and legal rights of the parent or guardian, (3) a list of local organizations that provide free or reduced-cost legal services and how to access such services, and (4) a check box for such parent or guardian to request the services of an interpreter at any such meeting. Such notice shall be provided as soon as is practicable prior to the date of any removal meeting, or, if immediate removal was authorized, not later than twenty-four hours after such removal. The commissioner shall obtain the signature of such

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- parent or guardian acknowledging receipt of such notice and provide the services of an interpreter at any such meeting for which an interpreter has been requested by such parent or guardian.
- Sec. 24. Section 17a-248g of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2022*):
 - (a) Subject to the provisions of this section, funds appropriated to the lead agency for purposes of section 17a-248, sections 17a-248b to 17a-248f, inclusive, this section and sections 38a-490a and 38a-516a shall not be used to satisfy a financial commitment for services that would have been paid from another public or private source but for the enactment of said sections, except for federal funds available pursuant to Part C of the Individuals with Disabilities Education Act, 20 USC 1431 et seq., except that whenever considered necessary to prevent the delay in the receipt of appropriate early intervention services by the eligible child or family in a timely fashion, funds provided under said sections may be used to pay the service provider pending reimbursement from the public or private source that has ultimate responsibility for the payment.
 - (b) Nothing in section 17a-248, sections 17a-248b to 17a-248f, inclusive, this section and sections 38a-490a and 38a-516a shall be construed to permit the Department of Social Services or any other state agency to reduce medical assistance pursuant to this chapter or other assistance or services available to eligible children. Notwithstanding any provision of the general statutes, costs incurred for early intervention services that otherwise qualify as medical assistance that are furnished to an eligible child who is also eligible for benefits pursuant to this chapter shall be considered medical assistance for purposes of payments to providers and state reimbursement to the extent that federal financial participation is available for such services.
 - (c) Providers of early intervention services shall, in the first instance and where applicable, seek payment from all third-party payers prior to claiming payment from the birth-to-three system for services rendered to eligible children, provided, for the purpose of seeking payment from

the Medicaid program or from other third-party payers as agreed upon by the provider, the obligation to seek payment shall not apply to a payment from a third-party payer who is not prohibited from applying such payment, and who will apply such payment, to an annual or lifetime limit specified in the third-party payer's policy or contract.

- (d) The commissioner, in consultation with the Office of Policy and Management and the Insurance Commissioner, shall adopt regulations, pursuant to chapter 54, providing public reimbursement for deductibles and copayments imposed under an insurance policy or health benefit plan to the extent that such deductibles and copayments are applicable to early intervention services.
- (e) [The commissioner shall establish and periodically revise, in accordance with this section, a schedule of fees based on a sliding scale for early intervention services. The schedule of fees shall consider the cost of such services relative to the financial resources of the state and the parents or legal guardians of eligible children, provided that on and after October 6, 2009, the commissioner shall (1) charge fees to such parents or legal guardians that are sixty per cent greater than the amount of the fees charged on the date prior to October 6, 2009; and (2) charge fees for all services provided, including those services provided in the first two months following the enrollment of a child in the program. Fees may be charged to any such parent or guardian, regardless of income, and shall be charged to any such parent or guardian with a gross annual family income of forty-five thousand dollars or more, except that no fee may be charged to the parent or guardian of a child who is eligible for Medicaid. Notwithstanding the provisions of subdivision (8) of section 17a-248, as used in this subsection, "parent" means the biological or adoptive parent or legal guardian of any child receiving early intervention services. The lead agency may assign its right to collect fees to a designee or provider participating in the early intervention program and providing services to a recipient in order to assist the provider in obtaining payment for such services. The commissioner may implement procedures for the

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- collection of the schedule of fees while in the process of adopting or amending such criteria in regulation, provided the commissioner posts notice of intention to adopt or amend the regulations on the eRegulations System, established pursuant to section 4-173b, within twenty days of implementing the policy. Such collection procedures and schedule of fees shall be valid until the time the final regulations or amendments are effective] The commissioner shall not charge a fee for early intervention services to the parents or legal guardians of eligible children.
 - (f) [The] With respect to early intervention services rendered prior to July 1, 2022, the commissioner shall develop and implement procedures to hold a recipient harmless for the impact of pursuit of payment for [early intervention] such services against lifetime insurance limits.
 - (g) Notwithstanding any provision of title 38a relating to the permissible exclusion of payments for services under governmental programs, no such exclusion shall apply with respect to payments made pursuant to section 17a-248, sections 17a-248b to 17a-248f, inclusive, this section and sections 38a-490a and 38a-516a. Except as provided in this subsection, nothing in this section shall increase or enhance coverages provided for within an insurance contract subject to the provisions of section 10-94f, subsection (a) of section 10-94g, subsection (a) of section 17a-219b, subsection (a) of section 17a-219c, sections 17a-248, 17a-248b to 17a-248f, inclusive, this section, and sections 38a-490a and 38a-516a.
 - Sec. 25. Subdivision (10) of subsection (a) of section 10-76d of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2021*):
 - (10) (A) Each local and regional board of education responsible for providing special education and related services to a child or pupil shall notify the parent or guardian of a child who requires or who may require special education, a pupil if such pupil is an emancipated minor or eighteen years of age or older who requires or who may require special education or a surrogate parent appointed pursuant to section

10-94g, in writing, at least five school days before such board proposes to, or refuses to, initiate or change the child's or pupil's identification, evaluation or educational placement or the provision of a free appropriate public education to the child or pupil.

(B) Upon request by a parent, guardian, pupil or surrogate parent, the responsible local or regional board of education shall provide such parent, guardian, pupil or surrogate parent an opportunity to meet with a member of the planning and placement team designated by such board prior to the referral planning and placement team meeting at which the assessments and evaluations of the child or pupil who requires or may require special education is presented to such parent, guardian, pupil or surrogate parent for the first time. Such meeting shall be for the sole purpose of discussing the planning and placement team process and any concerns such parent, guardian, pupil or surrogate parent has regarding the child or pupil who requires or may require special education.

(C) Such parent, guardian, pupil or surrogate parent shall (i) be given at least five school days' prior notice of any planning and placement team meeting conducted for such child or pupil, (ii) have the right to be present at and participate in all portions of such meeting at which an educational program for such child or pupil is developed, reviewed or revised, [and] (iii) have the right to have (I) advisors of such person's own choosing and at such person's own expense, [and to have] (II) the school paraprofessional assigned to such child or pupil, if any, [to be present at and to] and (III) such child or pupil's birth-to-three service coordinator, if any, attend and participate in all portions of such meeting at which an educational program for such child or pupil is developed, reviewed or revised, and (iv) have the right to have each recommendation made in such child or pupil's birth-to-three individualized transition plan, as required by section 17a-248e, as amended by this act, if any, addressed by the planning and placement team during such meeting at which an educational program for such child or pupil is developed.

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(D) Immediately upon the formal identification of any child as a child requiring special education and at each planning and placement team meeting for such child, the responsible local or regional board of education shall inform the parent or guardian of such child or surrogate parent or, in the case of a pupil who is an emancipated minor or eighteen years of age or older, the pupil of (i) the laws relating to special education, (ii) the rights of such parent, guardian, surrogate parent or pupil under such laws and the regulations adopted by the State Board of Education relating to special education, including the right of a parent, guardian or surrogate parent to (I) withhold from enrolling such child in kindergarten, in accordance with the provisions of section 10-184, and (II) have advisors and the school paraprofessional assigned to such child or pupil [to be present at, and to] attend and participate in [,] all portions of such meeting at which an educational program for such child or pupil is developed, reviewed or revised, in accordance with the provisions of subparagraph (C) of this subdivision, and (iii) any relevant information and resources relating to individualized education programs created by the Department of Education, including, but not limited to, information relating to transition resources and services for high school students. If such parent, guardian, surrogate parent or pupil does not attend a planning and placement team meeting, the responsible local or regional board of education shall mail such information to such person.

- (E) Each local and regional board of education shall have in effect at the beginning of each school year an educational program for each child or pupil who has been identified as eligible for special education.
- (F) At each initial planning and placement team meeting for a child or pupil, the responsible local or regional board of education shall inform the parent, guardian, surrogate parent or pupil of (i) the laws relating to physical restraint and seclusion pursuant to section 10-236b and the rights of such parent, guardian, surrogate parent or pupil under such laws and the regulations adopted by the State Board of Education relating to physical restraint and seclusion, and (ii) the right of such

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- parent, guardian, surrogate parent or pupil, during such meeting at which an educational program for such child or pupil is developed, to have (I) such child or pupil's birth-to-three service coordinator attend and participate in all portions of such meeting, and (II) each recommendation made in the transition plan, as required by section 17a-248e, as amended by this act, by such child or pupil's birth-to-three service coordinator addressed by the planning and placement team.
 - (G) Upon request by a parent, guardian, pupil or surrogate parent, the responsible local or regional board of education shall provide the results of the assessments and evaluations used in the determination of eligibility for special education for a child or pupil to such parent, guardian, surrogate parent or pupil at least three school days before the referral planning and placement team meeting at which such results of the assessments and evaluations will be discussed for the first time.
- 948 Sec. 26. Subsection (i) of section 10-76d of the general statutes is 949 repealed and the following is substituted in lieu thereof (*Effective July 1*, 950 2021):
 - (i) (1) No local or regional board of education shall discipline, suspend, terminate or otherwise punish any member of a planning and placement team employed by such board who discusses or makes recommendations concerning the provision of special education and related services for a child during a planning and placement team meeting for such child.
 - (2) No birth-to-three service coordinator or qualified personnel, as those terms are defined in section 17a-248, who discusses or makes recommendations concerning the provision of special education and related services for a child during a planning and placement team meeting for such child or in a transition plan, as required by section 17a-248e, as amended by this act, shall be subject to discipline, suspension, termination or other punishment on the basis of such recommendations.
- 964 Sec. 27. Section 17a-248e of the general statutes is repealed and the

following is substituted in lieu thereof (*Effective July 1, 2021*):

- (a) Each eligible child and his <u>or her</u> family shall receive (1) a multidisciplinary assessment of the child's unique needs and the identification of services appropriate to meet such needs, (2) a written individualized family service plan developed by a multidisciplinary team, including the parent, within forty-five days after the referral, [and] (3) review of the individualized family service plan with the family at least every six months, with evaluation of the individualized family service plan at least annually, and (4) if the child is ineligible for participation in preschool programs under Part B of the Individuals with Disabilities Act, 20 USC 1471 et seq., a screening for developmental and social-emotional delays using validated assessment tools, such as the Ages and Stages Questionnaire and the Ages and Stages Social-Emotional Questionnaire, or their equivalents.
- (b) The individualized family service plan shall be in writing and contain: (1) A statement of the child's present level of physical development, cognitive development, language and development and self-help skills, based on acceptable objective criteria; (2) a statement of the family's priority, resources and concerns relating to enhancing the development of the eligible child; (3) a statement of the major outcomes expected to be achieved for the child and the family and the criteria, procedures and timelines used to determine the degree to which progress toward achieving the outcomes are being made, and whether modifications or revisions of the outcomes are necessary; (4) a statement of specific early intervention services necessary to meet the unique needs of the eligible child and the family, including the frequency, intensity and the method of delivering services; (5) a statement of the natural environments in which the services shall be provided; (6) the projected dates for initiation of services and the anticipated duration of such services; (7) the name of the approved comprehensive service provider that will provide or procure the services specified in the individualized family service plan; (8) the name of the individual service coordinator from the profession most

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- immediately relevant to the eligible child's or the family's needs who will be responsible for the implementation of the plan and coordination with the other agencies and providers or an otherwise qualified provider selected by a parent; and (9) the steps to be taken to support the transition of the child who is eligible for participation in preschool programs under Part B of the Individuals with Disabilities Act, 20 USC 1471 et seq., as appropriate.
 - (c) The individualized family service plan shall be signed by the child's pediatrician or a primary care provider or qualified personnel, as those terms are defined in section 17a-248.
 - (d) The lead agency may provide early intervention services, arrange for the delivery of early intervention services by participating agencies or contract with providers to deliver early intervention services to eligible children and the families of such children. The lead agency in providing, arranging or contracting for early intervention services shall monitor all birth-to-three service providers for quality and accountability in accordance with Section 616 of the Individuals with Disabilities Education Act, 20 USC 1416 and establish state-wide rates for such services.
 - Sec. 28. (NEW) (*Effective July 1*, 2021) Not later than July 1, 2022, the Commissioner of Early Childhood shall develop and implement a plan to expand the birth-to-three program, established pursuant to section 17a-248b of the general statutes, as amended by this act, to provide early intervention services to any child who is (1) enrolled in the program, (2) turns three years of age on or after May 1 and not later than the first day of the next school year commencing July 1, and (3) is eligible for participation in preschool programs under Part B of the Individuals with Disabilities Act, 20 USC 1471 et seq., provided such services shall terminate upon such child's participation in such a preschool program. The commissioner may adopt regulations in accordance with chapter 54 of the general statutes to implement the provisions of this section.
- Sec. 29. (NEW) (Effective July 1, 2021) For the school year commencing

July 1, 2022, and each school year thereafter, in any school district that serves a town that has not convened or established a local or regional school readiness council pursuant to section 10-16r of the general statutes, the local or regional board of education for such school district shall designate a school readiness liaison. Such liaison shall (1) be an existing employee of such school district, and (2) serve as an informational resource for parents of children transitioning from the birth-to-three program established pursuant to section 17a-248b of the general statutes, to enrollment in a public elementary school in such school district.

Sec. 30. (*Effective from passage*) (a) As used in this section, (1) "adverse childhood experience" means a potentially traumatic event occurring in childhood, including, but not limited to, (A) experiencing or witnessing violence, abuse, neglect, a substance abuse disorder, a suicide attempt or death by suicide, or (B) experiencing instability due to parental separation or incarceration, and (2)"participating municipalities" means the municipalities of Bridgeport, Cheshire, East Hartford, Killingworth, Orange and South Windsor.

- (b) The Department of Education shall establish an adverse childhood experience survey pilot program to be administered in participating municipalities. Such pilot program shall be for the purpose of collecting data concerning adverse childhood experiences suffered by students in grades four to twelve, inclusive, enrolled in public schools in participating municipalities.
- (c) Not later than October 1, 2021, the Department of Education shall develop a survey that requires the student taking the survey to indicate whether the student has witnessed or experienced one or more potentially traumatic events, including, but not limited to, (1) violence, abuse, neglect, a substance abuse disorder, a suicide attempt or death by suicide, or (2) instability due to parental separation or incarceration. The survey shall (A) be tailored to the developmental stages of the students administered the survey, and (B) not include any personally identifying information.

- (d) Not later than August 1, 2022, the Department of Education shall require each public school enrolling students in grades four to twelve, inclusive, in participating municipalities to administer the survey developed pursuant to subsection (c) of this section, and report the results of the survey to the department in a form and manner prescribed by the department. Such report shall (1) include, but not be limited to, the number of students in each grade who have suffered each type of potentially traumatic event, and (2) not include any data concerning the number or types of potentially traumatic events suffered by any one student.
- (e) Not later than December 1, 2022, the Department of Education shall submit a report, in accordance with the provisions of section 11-4a of the general statutes, to the joint standing committee of the General Assembly having cognizance of matters relating to children. Such report shall include a summary of the number of students in each grade in each participating municipality who have suffered each type of potentially traumatic event.
- Sec. 31. (Effective from passage) (a) There is established a task force to study the comprehensive needs of children in the state and the extent to which such needs are being met by educators, community members and local and state agencies. The task force shall (1) assess the needs of children using the following tenets of the whole child initiative developed by the Association for Supervision and Curriculum Development: (A) Each student enters school healthy and learns about and practices a healthy lifestyle, (B) each student learns in an environment that is physically and emotionally safe for students and adults, (C) each student is actively engaged in learning and is connected to the school and broader community, (D) each student has access to personalized learning and is supported by qualified, caring adults, and (E) each student is challenged academically and prepared for success in college or further study and for employment and participation in a global environment, (2) recommend new programs or changes to existing programs operated by educators or local or state agencies to

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- better address the needs of children in the state, and (3) recognize any exceptional efforts to meet the comprehensive needs of children by educators, community members or local or state agencies. As used in this section, "community member" means any individual or private organization that provides services or programs for children.
- 1101 (b) The task force shall consist of the following members:
 - (1) Two appointed by the speaker of the House of Representatives, one of whom is an educator employed by a local or regional board of education and one of whom is a social worker licensed pursuant to chapter 383b of the general statutes who works with children;
 - (2) Two appointed by the president pro tempore of the Senate, one of whom is a representative of the board of directors of the Association for Supervision and Curriculum Development affiliate in the state, and one of whom is representative of an institution of higher education in the state;
- 1111 (3) One appointed by the majority leader of the House of 1112 Representatives, who is a school administrator employed by a local or 1113 regional board of education;
- 1114 (4) One appointed by the majority leader of the Senate, who is a 1115 chairperson of a local or regional board of education;
- 1116 (5) One appointed by the minority leader of the House of 1117 Representatives, who is a director or employee of a private nonprofit 1118 organization in the state that provides services or programs for children;
- 1119 (6) One appointed by the minority leader of the Senate, who is a 1120 director or employee of a private nonprofit organization in the state that 1121 provides health-related services or programs for children;
- 1122 (7) The Commissioner of Education, or the commissioner's designee;
- 1123 (8) The Commissioner of Early Childhood, or the commissioner's

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1124	designee;		
1125	(9) The Healthcare Advocate, or the advocate's designee;		
1126	(10) The Labor Commissioner, or the commissioner's designee;		
1127 1128	(11) The executive director of the Commission on Human Rights and Opportunities, or the executive director's designee;		
1129 1130	(12) The Commissioner of Agriculture, or the commissioner's designee;		
1131 1132	(13) The Commissioner of Economic and Community Development or the commissioner's designee;		
1133	(14) The Commissioner of Housing, or the commissioner's designee		
1134 1135	(15) The Commissioner of Public Health, or the commissioner's designee;		
1136 1137	(16) The Commissioner of Developmental Services, or the commissioner's designee;		
1138 1139	(17) The Commissioner of Mental Health and Addiction Services, or the commissioner's designee;		
1140 1141	(18) The Commissioner of Transportation, or the commissioner's designee;		
1142 1143	(19) The Commissioner of Social Services, or the commissioner designee;		
1144 1145	(20) The superintendent of the Technical Education and Caree System, or the superintendent's designee;		
1146 1147	(21) The Commissioner of Children and Families, or the commissioner's designee; and		

(22) The Chief Court Administrator, or the Chief Court

1149 Administrator's designee.

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- 1150 (c) Any member of the task force appointed under subdivisions (1) to 1151 (6), inclusive, of subsection (b) of this section may be a member of the 1152 General Assembly.
- (d) All initial appointments to the task force shall be made not later than thirty days after the effective date of this section. Any vacancy shall be filled by the appointing authority not later than thirty days after the vacancy occurs. If a vacancy is not filled by the appointing authority, the chairpersons of the task force may fill such vacancy.
 - (e) The speaker of the House of Representatives and the president pro tempore of the Senate shall select the chairpersons of the task force from among the members of the task force. Such chairpersons shall schedule the first meeting of the task force, which shall be held not later than sixty days after the effective date of this section.
 - (f) The administrative staff of the joint standing committee of the General Assembly having cognizance of matters relating to children shall serve as administrative staff of the task force.
 - (g) Not later than January 1, 2022, the task force shall submit a report on its findings and recommendations to the joint standing committee of the General Assembly having cognizance of matters relating to children, in accordance with the provisions of section 11-4a of the general statutes. The task force shall terminate on the date that it submits such report or January 1, 2022, whichever is later.

This act shall take effect as follows and shall amend the following sections:				
Section 1	July 1, 2021	New section		
Sec. 2	July 1, 2021	20-12b(a)		
Sec. 3	July 1, 2021	20-73b(a)		
Sec. 4	July 1, 2021	20-74h		
Sec. 5	July 1, 2021	New section		
Sec. 6	July 1, 2021	20-102ee(a)		

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July 1, 2021	20-185k(b)
July 1, 2021	20-195ttt(f)
July 1, 2021	20-206mm(d) and (e)
July 1, 2021	19a-14c
July 1, 2021	10-148a(a)
July 1, 2021	10-220a(b)
July 1, 2021	10-220(b)
July 1, 2021	10-221
from passage	New section
from passage	New section
July 1, 2021	10-16
from passage	10-198b
July 1, 2021	New section
July 1, 2021	10-215
July 1, 2021	17a-10a
July 1, 2021	17a-103a
July 1, 2021	New section
July 1, 2022	17a-248g
July 1, 2021	10-76d(a)(10)
July 1, 2021	10-76d(i)
July 1, 2021	17a-248e
July 1, 2021	New section
July 1, 2021	New section
from passage	New section
from passage	New section
	July 1, 2021 from passage from passage July 1, 2021

Statement of Legislative Commissioners:

In Section 5(c), "Department of Health" was changed to "Department of Public Health" for accuracy; in Section 14(g)(3)(B), "such student" was changed to "such student's" for accuracy; in Section 16(c), "learning to" was changed to "learning for" for accuracy; in Section 17, "provided such virtual learning" was changed to "provided that, on and after January 1, 2022, such virtual learning" for accuracy and internal consistency; in Section 20(b)(2), "a la cart" was changed to "a la carte" for accuracy; in Section 29(2), "17a-248" was changed to "17a-248b" for accuracy; and in Section 30(c) to (e), inclusive, "traumatic" was changed to "potentially traumatic" for internal consistency.

KID Joint Favorable Subst.